

# 2005 Dental Plan *Highlights*

**Note:** This chart is a summary only. If the information differs from that of the official plan documents, the plan documents will govern. For details, contact the insurance carrier.

Benefit	Delta Premier Plan In-Network	Delta Premier Plan Out-of-Network	Delta Network Preferred Plan <sup>3</sup>
Calendar year maximum	\$1,000 per person	\$1,000 per person	No annual maximum
Calendar year deductible	\$75 per person; \$225 per family	\$75 per person; \$225 per family	No deductible
Class I — preventive and diagnostic care (initial and periodic exams, cleanings, routine X-rays)	100%; <u>no</u> deductible	100% of the maximum plan allowance <sup>1</sup> (MPA); <u>no</u> deductible	100% for most benefits (except Space Maintainer)
Class II — basic restorative care (fillings, extractions, root canal, periodontal treatment)	80%; <u>no</u> deductible	80% of MPA <sup>1</sup> ; <u>no</u> deductible	100% of some services; flat dollar amount set for other services
Class III — major restorative care (crowns, dentures, bridges)	50% <u>after</u> deductible	50% of MPA <sup>1</sup> <u>after</u> deductible	Flat dollar amount set for most services
Class IV — Orthodontia (braces)	50% <u>after</u> deductible; \$100 annual deductible <sup>2</sup> ; \$1,000 lifetime maximum	50% of MPA <sup>1</sup> <u>after</u> deductible; \$100 annual deductible <sup>2</sup> ; \$1,000 lifetime maximum	Flat dollar amount set for all services
Class V — TMJ	50% <u>after</u> deductible; \$100 annual deductible <sup>2</sup> ; \$750 lifetime maximum	50% of MPA <sup>1</sup> <u>after</u> deductible; \$100 annual deductible <sup>2</sup> ; \$750 lifetime maximum	Not a covered benefit

<sup>1</sup> Maximum plan allowance (MPA). You are not responsible for charges over the MPA if you go to a participating Delta dentist. You are responsible for charges over the MPA if you go to a non-participating dentist.

<sup>2</sup> These deductibles are in addition to the plan deductible.

<sup>3</sup> Under the Preferred Plan, you must visit a Preferred Plan dentist or you will not receive benefits, however you do not have to choose a primary care dentist. No Out-of-Network benefits available with this plan.